

484.60 Care Planning, Coordination of Services, and Quality of Care

Presenter: Darlene Fuller, RN, BSN

Health Care Surveyor-BCHS

Department of Licensing and Regulatory

Affairs

Presentation Overview:

- Review the Revised COP for Care Planning,
 Coordination of Services and Quaity of Care
- What are the top deficiencies cited in Michigan
- Understanding the Interpetive Guidelines
- Questions and Answers





484.60 Condition of Participation: Care Planning, Coordination of Services and Quality of Care

G 572 & G 574-Individualized Plan of Care (two of the top fifteen most cited deficiencies)

G 576-Patient Care Orders, including Verbal Orders

G 578-Conformance with Physician Orders

G 580-Drugs, Services and Treatments are Administered only as ordered by a physician

G 582-Vaccines (Influenza and Pneumococcal)

G 584-Acceptance of Verbal Orders

G 586 & 588—Review and Revision of the Individualized Plan of Care

484.60 Condition of Participation: Care Planning, Coordination of Services and Quality of Care (Cont.)

G 590 **Promptly** alert the physician to any changes in the patient's condition or needs, or that the plan of care should be altered

G 592 Revised plan of care

G 594 Revisions to the plan of care must be communicated as follows:

G 596 Revisions due to the change in patient health status

G 598 Revision related to plans for the patient's discharge

G 600 Coordination of Care: The HHA must:

G 602 Assure communication with all physicians involved in the plan of care



484.60 Condition of Participation: Care Planning, Coordination of Services and Quality of Care (Cont.)

G 604 Integrate orders from all physicians involved in the plan of care to assure the coordination of all services and interventions

G 606 Integrate services, to assure the identification of patient needs and factors that could affect patient safety and treatment effectiveness and the coordination of care provided by all disciplines (one of the top fifteen most cited deficiency)

G 608 Coordinate care delivery to meet the patient's needs

G 610 Ensure the patient/caregiver receives ongoing education and training provided by the HHA

G 612 Written information to the patient

G 614 Visit schedule, including frequency of visits by the HHA personnel and contract personnel



484.60 Condition of Participation: Care Planning, Coordination of Services and Quality of Care (Cont.)

G 616 Patient medication schedule/instructions

G 618 Any treatments to be administered by the HHA personnel and contract personnel, including therapy services

G 620 Any other pertinent instructions related to the patient's care and treatments that the HHA will provide, specific to the patient's care needs

G 622 Name and contact information of the HHA clinical manager



Two of the top 15 most cited deficiency

G 572 Individualized Plan of Care

Each patient must receive the home health services that are written in an individualized plan of care that identifies patient-specific measurable outcomes and goals, and which are established, periodically reviewed, and signed by a doctor of medicine, osteopathy, or podiatry acting within the scope of his or her state license, or certification, or registration.

Patient goals are individualized to the patient based on the medical diagnoses, physician's orders, comprehensive assessment and patient input. Progress/non-progress toward achieving the goals are quantified through measurable outcomes, which maybe described as a patient's response to a healthcare intervention.

Two of the top 15 most cited deficiency

*G 574 Contents of the Individualized Plan of Care*The individualized plan of care must include the following:

- (i) All pertinent diagnoses; Means all known diagnoses
- (ii) The patient's mental, psychosocial, and cognitive status;
- (iii) The types of services, supplies and equipment required;
- (iv) The frequency and duration of visits to be made;
- (v) Prognosis;
- (vi) Rehabilitation potential;
- (vii) Functional limitations;
- (viii) Activities Permitted
- (ix) Nutritional Requirements

Two of the top 15 most cited deficiency (Cont.)

G 574 Contents of the Individualized Plan of Care (Cont.) The individualized plan of care must include the following:

- (x) All medications and treatments;
- (xi) Safety measures to protect against injury;
- (xii) A description of the patient's risk for emergency department visits and hospital re-admission, and all necessary interventions to address the underlying risk factors.
- (xiii) Patient and caregiver education and training to facilitate timely discharge;
- (xiv) Patient specific interventions and education;
- (xv) Information related to any advanced directives; and
- (xvi) Any additional items the HHA or physician may choose to include.

One of the top 15 most cited deficiency

484.60(d)(3) Integrate All Services – G 606

Integrate all services, whether services are provided directly or under arrangement, to assure the identification of patient needs and factors that could affect patient safety and treatment effectiveness and the coordination of care provided by all disciplines. The HHA provides/schedules care by various disciplines in a manner that:

The agency manages the scheduling of patients taking into consideration the type of services that are being provided on a given day; a patient may become fatigues after an aide visit, assisting with a bath just before a physical therapy visit, thus making the therapy session less effective



484.60(d)(3) Integrate All Services - G 606 (Cont.)

- The agency manages pain during physical therapy or physical care (i.e. dressing changes or wound care) in order to minimize patient discomfort while maximizing the effectiveness of the therapy session.
- The agency works with the patient to recommended and make safety modifications in the home.
- The agency assures that staff who provide care are communicating any patient concerns and patient progress toward the goals of the plan of care with others involved in the patient's care.



THANK YOU!

QUESTIONS AND ANSWERS

